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SEC 1972 Potential persons who are to respond to the collection of information contained in this (6-02) form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

JUN 0 9 2003

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

BEST AVAILABLE COPY

Brief Description of Business

Mortgage Broker Services

FORM D

PROCESSE Estimate hours

THOMSON FINANCIAL OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden hours per response... 1

NOTICE OF SALE OF SECURITIES / \(\)
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY
Prefix Serial

DATE RECEIVED

	BATE AGOST ES
Name of Offering ([] check if this is an amendment and name has changed, and indi	cate change.)
Filing Under (Check box(es) that apply): [3] Rule 504 [3] Rule 505 [3] Rule 506 [3] S	ection 4(6) [] ULOE
Type of Filing: $[X]$ New Filing $[X]$ Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	03021358
Name of Issuer ([] check if this is an amendment and name has changed, and indic	ciate change.)
Hometown Equity Mortgage of Kansas City, Inc.	816-333-0004
Address of Executive Offices (Number and Street, City, State, Zip Code) (Including Area Code)	Telephone Number
9233 Ward Parkway, Suite 225, Kansas City, MO	64114
Address of Principal Business Operations (Number and Street, City, State, Zip Code (Including Area Code) (if different from Executive Offices)	e) Telephone Number
N/A	

Type of Business Organization			
[x] corporation	[] limited partnership, alrea	dy formed	[] other (please specify):
[] business trust	[] limited partnership, to be	formed	
Actual or Estimated Date of Inco Jurisdiction of Incorporation or C	poration or Organization:		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[x] Promoter [x] Beneficial Owner	[x] Executive Officer	[X] Director [General and/or Managing Partner
Miller,	Donald S.			
Full Name (Last name	e first, if individual)			
#3 Lakes	hore Circle, Lake St	. Louis, MO	63367	
Business or Residenc	e Address (Number and Street, C	City, State, Zip Code)	
Check Box(es) that Apply:	[x] Promoter [x] Beneficial Owner	[x] Executive Officer	[_X] Director [] General and/or Managing Partner
	, Steven J			
Full Name (Last name	· ·	62201		
	lk, St. Charles, MO			
Business or Residence	e Address (Number and Street, 0	City, State, Zip Code)	
Check Box(es) that Apply:	[] Promoter [x] Beneficial Owner Mark	[x] Executive Officer	[x] Director [General and/or Managing Partner
Full Name (Last name	e first, if individual)			
•	dgewater Drive, Lee's	s Summit. MO	64064	
	e Address (Number and Street, C			
Dudinous or residence	or real coo (real bor and career, e	ony, orato, zip oodo	,	
Check Box(es) that Apply:	[] Promoter [x] Beneficial Owner Matthew Erich	[] Executive Officer	[x] Director [] General and/or Managing Partner
Full Name (Last name				
	Armitage #605, Chicae			
Business or Residence	ce Address (Number and Street, (City, State, Zip Code)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)	anto il a constante corre va con il formo differenzia il a contrib		
Business or Residence	ce Address (Number and Street, 0	City, State, Zip Code)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing

Full Name (Last name first, if individual)

						•							
Busine	ss or Re	esidence	Addres	s (Numl	per and	N/A Street C	ity State	e, Zip Co	de)				
				(110111	JOI 4	N/A	,, o	, z.p 00	40,				
Name	of Asso	ciated B	roker or	Dealer		*,1,-:-							
						N/A							
						Intends States		Purchas	sers	[] All S	tates	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [W]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Na	ame (La	st name	first, if ir	ndividua	1)	N/A							
Busine	ss or Re	esidence	Addres	s (Numl	ber and	Street, C	ity, State	e, Zip Co	de)				
						N/A	,						
Name	of Asso	ciated B	roker or	Dealer									
						N/A					······································		
				· ·		Intends States		t Purcha	sers	[] All S	tates	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
		Use bla	nk shee	et, or co	py and	use add	itional c	opies of	this she	eet, as n	ecessar	y.)	•
	C. (OFFERI	NG PRI	CE, NUM	MBER O	F INVES	TORS,	EXPENS	ES AND	USE O	PROCE	EDS	
and the if the to	e total a ransacti lumns b	mount a	ilready s exchan amoun	old. Ent ge offeri	er "0" if : ng, ched	answer i	s "none" ox " and i	is offering or "zero. Indicate i Thange	#	· ·	**************************************	e de la completa del la completa de la completa del la completa de la completa del la completa de la completa del la compl	Manuschiller (1994)

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ <u>.</u> ø	\$ø
Equity	\$ 147 000	\$ 147 000
[X] Common [] Preferred		
Convertible Securities (including warrants)	\$ø	\$
Partnership Interests	\$ Ø	\$ Ø
Other (Specify).	\$ Ø	\$ Ø
Total	\$ 147.000	\$147.000
Answer also in Appendix, Column 3, if filing under ULOE.		

Anaroasto

2. Enter the number of accredited and non-accredited investors who
ourchased securities in this offering and the aggregate dollar amounts of
their purchases. For offerings under Rule 504, indicate the number of
persons who have purchased securities and the aggregate dollar amount
of their purchases on the total lines. Enter "0" if answer is "none" or
'zero."

	Number Investors	Dollar Amount of Purchases
Accredited Investors	1	<u>\$147.000</u>
Non-accredited Investors		\$ <u>_</u>
Total (for filings under Rule 504 only)	1	<u> 147,000</u>
Answer also in Appendix, Column 4, if filing under ULOE.		

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering Rule 505	Type of Security	Sold \$
Regulation A		\$
Rule 504	N/A	\$
Total	11/11	\$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[]\$ <u>N/A</u>
Printing and Engraving Costs	[]\$100_00_
Legal Fees	[]\$_1_600
Accounting Fees	[]\$ 800.00
Engineering Fees	[]\$ <u>N/A</u>
Sales Commissions (specify finders' fees separately)	[]\$ <u>N/A</u>
Other Expenses (identify)	[]\$ <u>N/A</u>
Total	[]\$_2,500

- b. Enter the difference between the aggregate offering price given in response to Part C Question 1 and total expenses furnished in response to Part C Question 4.a. This difference is the "adjusted gross proceeds to the issuer."
- 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C Question 4.b above.

\$144.500

	Directors, & Affiliates	To Others
	Alimates 11	11
Salaries and fees	\$ <u>12,488</u>	\$ 52,054
Purchase of real estate	[] \$ N/A	[] \$ <u>N/A</u>
Purchase, rental or leasing and installation of machinery and equipment	[] \$ <u>N/A</u>	[]
Construction or leasing of plant buildings and facilities	[] \$ N/A	[] \$ <u>14.625</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		[] M/A
Repayment of indebtedness	[] N/A	[] N/A
Working capital	[M	M \$13,250
Other (specify): Advertising	[] \$ N/A	\$ 11,300
Office Supplies, Furniture, Decorations Legal Fees, Acct, Printing & Misc.	[] \$_N/A	M \$ 6,255
Column Totals	[] \$24,976	[] \$119,524
Total Payments Listed (column totals added)	·	44,500

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

Issuer (Print or Type)	Signature	Date
Hometown Equity Mortgage of Kansas City, Inc.	Johl Mill	5-30-03
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Donald S. Miller	President	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	
See Appendix, Column 5, for state response.	

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Hometown Equity Mortgage of	abls phille	5-30-03
Kansas City Inc	a sand parties	<u>i </u>
Name of Signer (Print or Type)	Title (Print or Type)	
Donald S. Miller	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2 3			4				5	
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors		Number of Non-Accredited Investors	Amount	Yes	No
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AK									
AZ									
AR									
CA									

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